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Fill in this information to identify yo	ur case:	
United States Bankruptcy Court fo	the:	
Eastern District of Pen	nsylvania	
Case number (If known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	☐ Check if this is a amended filing

### Official Form 101

#### Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Rose	
	Write the name that is on your	First name	First name
	government-issued picture	Merle	
	identification (for example, your driver's license or passport).	Middle name	Middle name
		Smith	
	Bring your picture identification to your meeting with the trustee.	Last name	Last name
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
2.	All other names you have used in the last 8 years	First name	First name
	•	i iist name	i iist name
	Include your married or maiden names and any assumed, trade names and doing business as	Middle name	Middle name
	names.	Last name	Last name
	Do NOT list the name of any		
	separate legal entity such as a corporation, partnership, or LLC	Business name (if applicable)	Business name (if applicable)
	that is not filing this petition.		
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your	xxx - xx - <u>9</u> <u>1</u> <u>6</u> <u>2</u>	xxx - xx
	Social Security number or federal Individual Taxpayer	 OR	OR
	Identification number	9xx - xx	9xx - xx
	(ITIN)	<del>3</del> ^^ - ^^	3^^ · ^^ ·

Debtor 1		Rose	Merle	Smith	Case number (if known)			
		First Name	Middle Name	Last Name	, ,			
			About Debtor 1	1:	About Debtor 2 (Spou	use Only in a Joint Case):		
4.	Your Emplo	yer Identification						
	Number (El		EIN		EIN			
			EIN		EIN			
5.	Where you	live			If Debtor 2 lives at a d	lifferent address:		
3.	whiere you	iive	8945 Leonar	rd St				
				treet	Number Street			
			Philadelphia	a, PA 19152-1316				
			City	State ZIP Code	City	State ZIP Code		
			Philadelphia	1				
			County		County			
				address is different from the one above, ote that the court will send any notices to ing address.		address is different from yours, fill e court will send any notices to you s.		
			Number S	treet	Number Street			
			P.O. Box		P.O. Box			
			City	State ZIP Code	City	State ZIP Code		
6.	Why you ar	e choosing <i>this</i> le for bankruptcy	Check one:		Check one:			
	uistrict to II	ie ioi bankiuptey	Over the la have lived district.	st 180 days before filing this petition, I in this district longer than in any other	Over the last 180 have lived in this district.	days before filing this petition, I district longer than in any other		
			I have anot (See 28 U.	ther reason. Explain. S.C. § 1408)	I have another rea (See 28 U.S.C. §	ason. Explain. 1408)		

Debt	tor 1	Rose	Merle	Smith	Case	number (if known)
		First Name	Middle Na	me Last Name		
Par	t 2: Tell the	e Court About You	ır Bankr	uptcy Case		
7.		of the Bankruptcy e choosing to file	Bankrupi		each, see <i>Notice Required by 11 U.S</i> ne top of page 1 and check the appro	C.C. § 342(b) for Individuals Filing for opriate box.
8.	How you wi	II pay the fee	detai chec a cre l nee to Pa l req judge offici choo	ils about how you may pay. Ty ck, or money order. If your atto edit card or check with a pre-pr ed to pay the fee in installmen ay The Filing Fee in Installmen uest that my fee be waived (Y e may, but is not required to, w al poverty line that applies to y	pically, if you are paying the fee you rney is submitting your payment on y inted address.  ts. If you choose this option, sign and its (Official Form 103A).  You may request this option only if you raive your fee, and may do so only if	your income is less than 150% of the o pay the fee in installments). If you
9.	Have you fil within the la	ed for bankruptcy st 8 years?		District  District  District	WhenWhenWhenWhenWhenWhenWhenWhen	Case number Case number
10.	pending or I spouse who case with yo	kruptcy cases being filed by a is not filing this bu, or by a rtner, or by an		District	When When When When When MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent	your residence?	✓ No. ☐ Yes.	No. Go to line 12.	n eviction judgment against you? nent About an Eviction Judgment Ag y petition.	rainst You (Form 101A) and file it

Debtor 1 Rose		Merle Smith		Case number (if known)					
		First Name	Middle	Name	Last Name				
Par	t 3: Report	About Any Busin	iesses	s You Own a	as a Sole Proprietor				
12.		ole proprietor of	<b>₫</b> N	lo. Go to Part	4.				
	any full- or pull- business?	oart-time	☐ Y	es. Name and	location of business				
A sole proprietorship business you operat individual, and is no legal entity such as		u operate as an and is not a separate uch as a	_	lame of business	s, if any				
		partnership, or LLC.	N	lumber S	Street				
	proprietorshi sheet and at	nore than one sole p, use a separate tach it to this	_						
	petition.		С	City		State	ZIP Code		
			C	Check the appi	ropriate box to describe your bu	ısiness:			
				Health Car	re Business (as defined in 11 U.	S.C. § 101(27A)	)		
				☐ Single Ass	et Real Estate (as defined in 11	U.S.C. § 101(51	1B))		
				☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))					
				☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))					
				None of the	e above				
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most receive sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents, follow the procedure in 11 U.S.C. § 1116(1)(B).			debtor, you must attach your most recent balance						
		on of <i>small business</i>	<b>☑</b> N	No. I am no	ot filing under Chapter 11.				
	debtor, see 11 U.S.C. § 101(51D).				ling under Chapter 11, but I am uptcy Code.	NOT a small bus	siness debtor according to the definition in the		
			☐ Y				btor according to the definition in the der Subchapter V of Chapter 11.		
			☐ Y		ling under Chapter 11, I am a sr uptcy Code, and I choose to pro		btor according to the definition in the chapter V of Chapter 11.		

Deb	tor 1	Rose	Merle	Smith		Case number	(if known) _	
		First Name	Middle Name	e Last Name				
Par	t 4: Repor	t if You Own or Ha	ave Any Ha	azardous Property or	Any Prope	rty That Needs Immediate	Attentior	١
14.	Do you owi	n or have any	☑ No.					
	alleged to p	at poses or is ose a threat of	☐ Yes.	What is the hazard?				
	imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate							
	attention?			If immediate attention is	needed, why	is it needed?		
		e, do you own oods, or livestock						
	that must be fed, or a building that needs urgent repairs?							
				Where is the property?				
					Number	Street		
					City		State	ZIP Code

City

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Debtor 1 Rose Merle Smith Case number (if known) \_\_\_\_\_\_

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

J	I am not required to receive a briefing about credit
	counseling because of:

counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

reasonably tried to do so.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1		Rose	Merle Smith			Case number (if known)		
		First Name	Middle N	lame Last Name				
Par	t 6: Answer	These Question	ns for Re	eporting Purposes				
16.	What kind of have?	debts do you		"incurred by an individual prima  No. Go to line 16b.  Yes. Go to line 17.	arily	er debts? Consumer debts are de for a personal, family, or househol s debts? Business debts are debts	d purp	oose."
				for a business or investment or  No. Go to line 16c.  Yes. Go to line 17.	thr	ough the operation of the business	s or in	vestment.
			16c.	State the type of debts you owe	e th	at are not consumer debts or busin	ness d	lebts.
17.	Are you filing	g under Chapter 7?		No. I am not filing under Chap	oter	7. Go to line 18.		
	exempt prop and administ paid that fun	nate that after any erty is excluded trative expenses ar ds will be available on to unsecured				Do you estimate that after any exe paid that funds will be available to		
18.	How many crestimate that	reditors do you you owe?		1-49		25,001-50,000 50,000	-100,0	000
19.	How much d assets to be	o you estimate you worth?	ur 🔲 💆	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.	How much d liabilities to b	o you estimate you oe?		\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million		\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Par	t 7: Sign Be	low						
For	you	If I have States ( If no atto have ob I reques I unders	e chosen to Code. I ur orney reportained are to relief in stand make otcy case	to file under Chapter 7, I am awanderstand the relief available unoresents me and I did not pay or not read the notice required by 1 accordance with the chapter of king a false statement, concealing	are der ag 1 U title	each chapter, and I choose to pro ree to pay someone who is not an S.C. § 342(b). e 11, United States Code, specified property, or obtaining money or pro	er Chaceed of attorn I in this operty	apter 7, 11,12, or 13 of title 11, United under Chapter 7. ey to help me fill out this document, I s petition.
				e Merle Smith				
				on 10/23/2024 MM/ DD/ YYYY				

Debtor 1	Rose	Merle Smith		Case number (if known)
	First Name	Middle Name	Last Name	
For your at	torney, if you are d by one	proceed under	Chapter 7, 11, 12, or 13 of	his petition, declare that I have informed the debtor(s) about eligibility to title 11, United States Code, and have explained the relief available under ole. I also certify that I have delivered to the debtor(s) the notice required by
If you are not represented by an attorney, you do not need to file this page.		11 U.S.C. § 34	§ 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.	
		X /s/ Mich	ael A. Cibik	Date <b>10/23/2024</b>
			of Attorney for Debtor	MM / DD / YYYY
		Michael	A. Cibik	
		Printed na		
		Cibik La	w PC	
		Firm name		
		1500 Wa	Inut Street Suite 900	
		Number	Street	
			phia	PA 19102
		City		State ZIP Code
		Contact ph	none <b>(215) 735-1060</b>	Email address help@cibiklaw.com
		23110		<u>PA</u>
		Bar numbe	er	State

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Fill in this inform	ation to identify your			
Debtor 1	Rose	Merle	Smith	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	Eastern	District of Pennsylva	ania_
Case number				Check amen

#### Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Describe Each Residenc	e, Building, Land, or Other Real Estate	You Own or Have an	Interest In			
1.	Do y	ou own or have any legal or equitabl	e interest in any residence, building, land, or simil	ar property?				
		No. Go to Part 2.						
	<b>₫</b> Y	es. Where is the property?						
	1.1	8945 Leonard St Street address, if available, or other	What is the property? Check all that apply.  ✓ Single-family home  □ Duplex or multi-unit building	Do not deduct secured claims or exemptions. Find the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Prope				
		description	<ul><li>☐ Condominium or cooperative</li><li>☐ Manufactured or mobile home</li><li>☐ Land</li></ul>	Current value of the entire property?	Current value of the portion you own?			
			☐ Investment property	\$256,560.00	\$256,560.00			
		Philadelphia, PA 19152-1316 City State ZIP Code Philadelphia	Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.				
		County	Who has an interest in the property? Check one.  ✓ Debtor 1 only	Fee Simple				
		,	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is community property (see instructions)				
			Other information you wish to add about this ite property identification number:	m, such as local				
			Source of Value: Redfin (\$320,700 less 20% of	closing costs)				
2.								
		2 3 3 6 1 3 G 1 G G 1 G G G G G G G G G G G G G						
			nterest in any vehicles, whether they are registered rehicle, also report it on Schedule G: Executory Control	•	s			
3.	Ca	rs, vans, trucks, tractors, sport utility	y vehicles, motorcycles					
		No						
	⊴	Yes						

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Debtor Smith, Rose Merle Case number (if known)

	3.1	Make:	BMW	Who has an interest in the propert	y? Check one.	Do not deduct secured cl	aims or exemptions. Put
			Х3	☑ Debtor 1 only		the amount of any secure	ed claims on <i>Schedule D:</i>
		Model:	<u> </u>	<ul><li>Debtor 2 only</li><li>Debtor 1 and Debtor 2 only</li></ul>		Creditors Who Have Clair	ms Secured by Property.
		Year:	2019	At least one of the debtors and a	nother	Current value of the entire property?	Current value of the portion you own?
		Approximate mileage:	80,000	Check if this is community pro instructions)	perty (see	\$19,370.00	\$19,370.00
		Other information:		e gener.e,			
		Source of Value: (Buy from Dealer					
4.		<i>nples:</i> Boats, trailers, mo lo		and other recreational vehicles, other watercraft, fishing vessels, snowmobile			
5.				wn for all of your entries from Part 2, umber here			\$19,370.00
Pa	rt 3:	Describe You	r Personal	and Household Items			
Do y	ou ow	n or have any legal or	equitable inte	rest in any of the following items?			Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		sehold goods and furn	-	ns. china. kitchenware			
	□ N		, , , , , , , , , , , , , , , , , , , ,	,			
		es. Describe		d pieces of furniture, furnishings s, each valued at \$600 or less.	, appliances,	linens, and other	\$700.00
7.	Elect	tronics					
		nples: Televisions and		ideo, stereo, and digital equipment; con ncluding cell phones, cameras, media p		s, scanners; music	
	□ N	lo					
	<b>1</b>	es. Describe	Various use or less.	d televisions, mobile devices, an	d computers	, each valued at \$600	\$450.00
8.	Colle	ectibles of value				_	
	Exan			s, prints, or other artwork; books, pictur collections, memorabilia, collectibles	es, or other art	objects; stamp, coin, or	
	<b>√</b> N	lo					
	ПΥ	es. Describe					

Debtor Smith, Rose Merle

Case number (if known)

9.	Equipment for sports and hobbies					
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments					
	<b>√</b> No					
	Yes. Des	scribe				
10.	Firearms					
	Examples:	Pistols, rifles, sh	otguns, ammunition, and related equipment			
	<b>√</b> No					
	Yes. Des	scribe				
11.	Clothes					
	Examples:	Everyday clothe	s, furs, leather coats, designer wear, shoes, accessories			
	☐ No					
	✓ Yes. Des	scribe	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$150.00		
12.	Jewelry	•				
	Examples:	Everyday jewelr silver	y, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold,			
	☐ No					
	✓ Yes. Des	scribe	Various used pieces of jewelry.	\$100.00		
13.	Non-farm a	nimals				
	Examples:	Dogs, cats, bird	s, horses			
	<b>√</b> No					
	Yes. Des	scribe				
14.	Any other p	ersonal and ho	usehold items you did not already list, including any health aids you did not list			
	<b>√</b> No					
	Yes. Give informati	e specific on				
15.			of your entries from Part 3, including any entries for pages you have attached er here	\$1,400.00		
Par	rt 4: D	escribe You	r Financial Assets			
Do yo	ou own or ha	ve any legal or	equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.		
16.	Cash Examples:	Money you have	e in your wallet, in your home, in a safe deposit box, and on hand when you file your petition			
		woney you nave	s in your wailer, in your nome, in a sale deposit box, and on hand when you life your petition			
	✓ No		Cash:			
	res		Cash:			

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Debtor Smith, Rose Merle Case number (if known)

17.	Deposits of money			
			ounts; certificates of deposit; shares in credit unions, brokerage houses, multiple accounts with the same institution, list each.	
	☐ No			
	<b>√</b> Yes		Institution name:	
			Bank of America	
		17.1. Checking account:	Account Number: 5388	\$8.00
			Peoples Alliance	
		17.2. Checking account:	Account Number: 3460	\$443.00
			Bank of America	
		17.3. Savings account:	Account Number: 4377	\$0.00
40	Danda mustual funda			
18.		or publicly traded stocks	okerage firms, money market accounts	
	_	, investment accounts with bit	okerage iiiiis, iiioney market accounts	
	<b>√</b> No			
	☐ Yes			
19.	Non-publicly traded st LLC, partnership, and		prated and unincorporated businesses, including an interest in an	
	<b>☑</b> No			
	Yes. Give specific information about them			
20.	Government and corpo	orate bonds and other nego	tiable and non-negotiable instruments	
			niers' checks, promissory notes, and money orders.  nsfer to someone by signing or delivering them.	
	<b>☑</b> No			
	Yes. Give specific information about them			
21.	Retirement or pension	accounts		
	Examples: Interests in	IRA, ERISA, Keogh, 401(k), 4	103(b), thrift savings accounts, or other pension or profit-sharing plans	
	<b>√</b> No			
	Yes. List each account separately.			
22.	Security deposits and	prepayments		
	Your share of all unused	d deposits you have made so	that you may continue service or use from a company	
	Examples: Agreements others	s with landlords, prepaid rent,	public utilities (electric, gas, water), telecommunications companies, or	
	<b>√</b> No			
	☐ Yes			

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Debtor Smith, Rose Merle Case number (if known)

23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
	☑ No	
	☐ Yes	
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	☑ No □ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	☑ No	
	Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property	
	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles	
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mon	ey or property owed to you?	Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you	
	<b>☑</b> No	
	Yes. Give specific information about them, including whether you already filed the returns and the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	
	☑ No	
	Yes. Give specific information	
30.	Other amounts someone owes you	
	Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else	
	☑ No	
	☐ Yes. Give specific information	

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Debtor Smith, Rose Merle

Case number (if known)

31.	Interests in insurance policies	
	Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance	
	☑ No	
	☐ Yes. Name the insurance company of each policy and list its value	
32.	Any interest in property that is due you from someone who has died	
	If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.	
	☑ No	
	☐ Yes. Give specific information	
33.	Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment	
	Examples: Accidents, employment disputes, insurance claims, or rights to sue	
	☑ No	
	☐ Yes. Describe each claim	
34.	Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims	
	☑ No	
	Yes. Describe each claim	
35.	Any financial assets you did not already list	
	☑ No	
	☐ Yes. Give specific information	
36.	Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here	0
Pa	rt 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part	1.
37.	Do you own or have any legal or equitable interest in any business-related property?	
	☑ No. Go to Part 6.	
	☐ Yes. Go to line 38.	
45.	Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	0
Pai	Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  If you own or have an interest in farmland, list it in Part 1.	
46.	Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
	☑ No. Go to Part 7.	
	☐ Yes. Go to line 47.	
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here	<u>0</u>
Pa	rt 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53.	Do you have other property of any kind you did not already list?	

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Debtor Smith, Rose Merle Case number (if known)

	<b>☑</b> No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	at number here	→	\$0.00
Pa	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2		<b>→</b>	\$256,560.00
56.	Part 2: Total vehicles, line 5	\$19,370.00		
57.	Part 3: Total personal and household items, line 15	\$1,400.00		
58.	Part 4: Total financial assets, line 36	\$451.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$21,221.00	Copy personal property total	+\$21,221.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$277,781.00

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Fill in this information to identify your case:								
Debtor 1	Rose	Merle	Smith					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	Sankruptcy Court for the	e: Eastern	District of Pennsylvania					
Case number								
(if known)				Check if this is an amended filing				

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Ide	ntify the Property You	Claim as Exempt				
1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ☑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any prope	rty you list on Schedule A	A/B that you claim as exe	empt,	fill in the information below.		
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own  Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption	
	Brief description:	8945 Leonard St Philadelphia, PA 19152-1316	\$256,560.00	✓	\$27,394.59		
	Line from Schedule A/B:	1.1			100% of fair market value, up to any applicable statutory limit	_	
	Brief description:	2019 BMW X3	\$19,370.00	<b>4</b>	\$0.00	11 U.S.C. § 522(d)(2)	
	Line from Schedule A/B:	3.1			100% of fair market value, up to any applicable statutory limit		
3.	3. Are you claiming a homestead exemption of more than \$189,050?  (Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)  1 No 1 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  1 No 1 Yes						

Last Name

Debtor 1 Rose Merle Document Page 17 of 52 Case number (if known) \_

Middle Name

First Name

	on of the property and ule A/B that lists this	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
property		Copy the value from Schedule A/B	Ch	eck only one box for each exemption.	
Brief description:	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$700.00	✓ı	\$700.00	11 II S C & 522(d)/2)
Line from				100% of fair market value, up to	11 U.S.C. § 522(d)(3)
Schedule A/B:	6			any applicable statutory limit	
Brief description:	Various used televisions, mobile devices, and computers, each valued at \$600 or	\$450.00			
	less.		<b>√</b>	\$450.00	11 U.S.C. § 522(d)(3)
_ine from Schedule A/B:				100% of fair market value, up to any applicable statutory limit	
Brief description:	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$150.00			
<b>.</b>	1033.		<b>₫</b>	\$150.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B:	11		Ц	100% of fair market value, up to any applicable statutory limit	
Brief	Various used	\$100.00			
description:	pieces of jewelry.			\$100.00	11 U.S.C. § 522(d)(4)
_ine from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	
Brief description:	Bank of America	\$8.00			
	Checking account Acct. No.: 5388		<b>1</b>	\$8.00	11 U.S.C. § 522(d)(5)
_ine from Schedule A/B:	17			100% of fair market value, up to	
Brief	Bank of America	\$0.00		any applicable statutory limit	
description:	Savings account	<u> </u>			
	Acct. No.: 4377		<b>A</b>	\$0.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	

Last Name

Debtor 1 Rose Document Page 18 of 52
Smith Case number (if known)

Middle Name

First Name

Part 2: Additional Page Brief description of the property and Current value of the Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this portion you own Check only one box for each exemption. property Copy the value from Schedule A/B Brief **Peoples Alliance** \$443.00 description: Checking account Acct. No.: 3460  $\sqrt{}$ \$443.00 11 U.S.C. § 522(d)(5) Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit

			Document	Page 19 of 5	<u> </u>		
Fill in this inform	nation to identify yo	ur case:					
Debtor 1	Rose	Merle	Smith				
Debtor 1	First Name	Middle Name	Last Name		<del></del>		
Dahtar 2							
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		<del></del> -		
	Thorramo						
United States E	Bankruptcy Court fo	or the: Easte	rn Dist	rict of Pennsylvani	<u>a</u>		
Case number (	if						
known)	_					☐ Check i amende	f this is an ed filing
0(" : 1 =	1000					amonac	74g
Official Forr	<u>n 106D</u>						
Schedu	le D: Cre	editors Who	Have C	laims Sec	ured by I	Property	12/15
Be as complete	and accurate as p	ossible. If two married	people are filing	together, both are equ	ally responsible fo	or supplying correct inf	ormation. If
		Additional Page, fill it ou					
name and case	number (if known	).					
-		secured by your prope	•				
		omit this form to the court	with your other so	hedules. You have noth	ning else to report or	this form.	
¥ Yes. Fill	in all of the informa	tion below.					
Part 1:	_ist All Secured	l Claims					
		Pr. I d			Column A	Column B	Column C
		creditor has more than or nore than one creditor ha			Amount of claim	Value of collateral	Unsecured
		s possible, list the claims	•		Do not deduct the	that supports this	portion
creditor's na	ame.				value of collateral.	claim	If any
2.1 Capital C	One Auto Financ	ce Describe	he property that	secures the claim:	\$38,331.00	\$19,370.00	\$18,961.00
Creditor's N	Name	2040 PM	WAY WA				
Attn: Ba	nkruptcy	2019 BM	IW X3				
7933 Pre	ston Rd	As of the	date you file, the	claim is: Check all that	apply.		
Number	Street	☐ Contin	gent				
Plano, T	X 75024-2302	Unliqui	dated				
City	State	ZIP Code Dispute	ed				
Who owes	the debt? Check	one. Nature of	lien. Check all tha	t apply.			
✓ Debtor	1 only	<b>⊴</b> An agr	eement you made	(such as mortgage or s	ecured car loan)		
Debtor	2 only			( lien, mechanic's lien)	,		
Debtor	1 and Debtor 2 on	ly 🔲 Judgm	ent lien from a law	suit			
At leas anothe	t one of the debtor r	s and Other (offset)	including a right to				
	if this claim relat	es to a					
Date debt	was incurred	7/1/2021 Last 4 dig	its of account nu	mber 1 0 0	1		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$38,331.00

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Page 20 of 52 Document Debtor 1 Smith Rose Merle Case number (if known)

Last Name

				Column A	Column B	Column C
		Additional Page		Amount of claim	Value of collateral	Unsecured
Part 1:		After listing any entries on thi	s page, number them beginning with 2.3,	Do not deduct the	that supports this	portion
		followed by 2.4, and so forth.		value of collateral.	claim	If any
2.2	City of	Philadelphia Law	Describe the property that secures the claim:	\$23,868.44	\$256,560.00	\$0.00
	Depart	•		<del></del>	<del></del>	
	Creditor's	s Name	8945 Leonard St Philadelphia, PA 19152-13	316		
	Tax &	Revenue MSB Unit	0040 Econara ot i iniaacipina, i A 10102 10	7.0		
	Bankrı	uptcy Group	As of the date you file, the claim is: Check all tha	t apply.		
	1401 J	ohn F. Kennedy Blvd., 5th	☐ Contingent			
	Floor	J	☐ Unliquidated			
	Number	Street	☐ Disputed			
	Philad	elphia, PA 19102-1595				
	City	State ZIP Code				
	Who ow	res the debt? Check one.	Nature of lien. Check all that apply.			
	<b>☑</b> Debt	tor 1 only	☐ An agreement you made (such as mortgage or s	secured car loan)		
	☐ Debt	tor 2 only	☑ Statutory lien (such as tax lien, mechanic's lien)			
	☐ Debt	tor 1 and Debtor 2 only	Judgment lien from a lawsuit			
	At le anot	ast one of the debtors and her	Other (including a right to offset)			
	_	ck if this claim relates to a munity debt				
	Date de	bt was incurred	Last 4 digits of account number 0 7 6	4		
2.3		bt was incurredal Revenue Service	Last 4 digits of account number 0 7 6  Describe the property that secures the claim:	<u>4</u> \$58,915.97	\$256,560.00	\$0.00
2.3		al Revenue Service	Describe the property that secures the claim:	\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's	al Revenue Service		\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's	al Revenue Service s Name	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13	\$58,915.97 B16	\$256,560.00	\$0.00
2.3	Interna Creditor's	al Revenue Service s Name ilized Insolvency	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that	\$58,915.97 B16	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat	al Revenue Service s Name ilized Insolvency	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent	\$58,915.97 B16	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number	al Revenue Service s Name ilized Insolvency tion x 7346	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that	\$58,915.97 B16	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number	al Revenue Service s Name slized Insolvency tion x 7346 Street	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated	\$58,915.97 B16	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City	al Revenue Service s Name slized Insolvency tion x 7346 Street elphia, PA 19101-7346	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated	\$58,915.97 B16	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City Who ow	al Revenue Service s Name slized Insolvency tion x 7346 Street elphia, PA 19101-7346 State ZIP Code	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated Disputed	\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City Who ow Debt	al Revenue Service s Name slized Insolvency tion x 7346 Street elphia, PA 19101-7346 State ZIP Code res the debt? Check one. stor 1 only tor 2 only	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.	\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City Who ow Debt Debt Debt	al Revenue Service s Name s Name slized Insolvency tion x 7346 Street elphia, PA 19101-7346 State ZIP Code res the debt? Check one. stor 1 only tor 2 only tor 1 and Debtor 2 only	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit	\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City Who ow Debt Debt Debt	al Revenue Service s Name s Name slized Insolvency tion x 7346 Street elphia, PA 19101-7346 State ZIP Code res the debt? Check one. for 1 only for 2 only for 1 and Debtor 2 only ast one of the debtors and	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or statutory lien (such as tax lien, mechanic's lien)	\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City Who ow Debt Debt At le anot Chee	al Revenue Service s Name s Name slized Insolvency tion x 7346 Street elphia, PA 19101-7346 State ZIP Code res the debt? Check one. for 1 only for 2 only for 1 and Debtor 2 only ast one of the debtors and	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated Disputed  Nature of lien. Check all that apply. An agreement you made (such as mortgage or statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to	\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City Who ow Debt Debt At le anoti Checom	al Revenue Service s Name s Name slized Insolvency tion x 7346 Street elphia, PA 19101-7346 State ZIP Code res the debt? Check one. for 1 only for 2 only for 1 and Debtor 2 only ast one of the debtors and ther ck if this claim relates to a	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated Disputed  Nature of lien. Check all that apply. An agreement you made (such as mortgage or statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to	\$58,915.97	\$256,560.00	\$0.00
2.3	Interna Creditor's Centra Operat PO Bo Number Philad City Who ow Debt Debt At le anot Chec com Date del	al Revenue Service s Name slized Insolvency tion  x 7346 Street elphia, PA 19101-7346 State ZIP Code res the debt? Check one. for 1 only for 2 only for 1 and Debtor 2 only ast one of the debtors and her ck if this claim relates to a munity debt bt was incurred	Describe the property that secures the claim:  8945 Leonard St Philadelphia, PA 19152-13  As of the date you file, the claim is: Check all that  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or some statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)	\$58,915.97	\$256,560.00	\$0.00

First Name

Middle Name

Debtor 1

Rose
First Name
Middle Name

Middle Name

Middle Name

Middle Name

Middle Name

Middle Name

Middle Name

Middle Name

Column A

Column B

Column C

Amount of claim
Value of collateral
Unsecured

			Column A	Column B	Column C			
	Additional Page		Amount of claim	Value of collateral	Unsecured			
Part	After listing any entries on the	After listing any entries on this page, number them beginning with 2.3,			portion			
	followed by 2.4, and so forth.		Do not deduct the value of collateral.	claim	If any			
_	PHH Mortgage Corp.	Describe the property that secures the claim:	\$146,381.00	\$256,560.00	\$0.00			
_	creditor's Name	8945 Leonard St Philadelphia, PA 19152-1316						
	Attn: Bankruptcy Department							
<u> </u>	P.O. Box 24605	As of the date you file, the claim is: Check all that apply.						
N	lumber Street	☐ Contingent						
١	West Palm Beach, FL 33416	☐ Unliquidated						
C	State ZIP Code	☐ Disputed						
V	Who owes the debt? Check one.	Nature of lien. Check all that apply.						
<b>Y</b>	Debtor 1 only	✓ An agreement you made (such as mortgage or )	secured car loan)					
	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)						
	Debtor 1 and Debtor 2 only	☐ Judgment lien from a lawsuit						
	At least one of the debtors and another	Other (including a right to offset)						
	Check if this claim relates to a community debt							
D	ate debt was incurred	Last 4 digits of account number 7 2 9	0					
A	add the dollar value of your entries in	Column A on this page. Write that number here:	\$146,381.00					
	this is the last page of your form, add	d the dollar value totals from all pages.	\$267,496.41					

			ocument	Page 22 o	of 52			
Fill in this info	rmation to identify yo	ur case:						
Debtor 1	Rose	Merle	Smith					
Debtor 1	First Name	Middle Name	Last Name			<del>-</del>		
D-1-10								
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Name			<del>-</del>		
(	9/ Tilst Name	Middle Name	Last Name					
United State	s Bankruptcy Court fo	or the: <b>Easter</b>	rn Dist	ict of Pennsyl	lvania			
Case numbe	ır							
(if known)							_	if this is an
							amende	ed filing
Official Fo	rm 106E/F							
Schod		roditors \\/	30 Have	Hacoci	irad (	Claims		
Scheu	ule E/F: C	reditors Wh	ю паче	Unsecu	пеа	Jiaiiiis .		12/15
other party to Form 106A/B) claims that are	any executory cont and on <i>Schedule G</i> e listed in <i>Schedule</i> htries in the boxes o	possible. Use Part 1 for or racts or unexpired least in Executory Contracts and D: Creditors Who Have on the left. Attach the Co	es that could res and Unexpired Le Claims Secured	ılt in a claim. Als ases (Official Foi <i>by Property</i> . If m	o list exec rm 106G). I ore space	utory contracts or Do not include any is needed, copy th	n <i>Schedule A/B:</i> P y creditors with pa he Part you need,	Property (Officia artially secured fill it out,
Part 1:	•	PRIORITY Unsecured	d Claims					
4 D								
	•	ity unsecured claims ag	ainst you?					
Yes.	So to Part 2.							
<u> </u>								
Part 2:	List All of Your	NONPRIORITY Unsec	cured Claims					
3. Do any o	reditors have nonp	riority unsecured claim	s against you?					
☐ No. Y	ou have nothing to re	eport in this part. Submit t	this form to the co	ırt with your other	schedules.			
✓ Yes	Ū			•				
nonpriori included	ty unsecured claim, li	insecured claims in the ist the creditor separately n one creditor holds a pain Page of Part 2.	for each claim. For	r each claim listed	d, identify w	hat type of claim it	is. Do not list claim	ns already
								Total claim
4.4								Total Claim
4.1 Affirm	, Inc.		Last 4 dig	ts of account nu	ımber _	1 P 2 Z		\$784.00
Nonprio	rity Creditor's Name		When was	the debt incurre	d?	6/1/2022		
Attn: I	Bankruptcy			tilo dobt mourie	_	0/1/2022	=	
30 Isa	bella St , Floor 4							
Number				•	claim is: 0	Check all that apply.		
Pittsb	urgh, PA 15212		☐ Contin	•				
City	State	e ZIP Co	ode D -					
·			Disput	ed				
	curred the debt? Ch	eck one.	Type of N	ONPRIORITY uns	secured cla	aim:		
	tor 1 only		☐ Studer	t loans				
	tor 2 only	ah.	☐ Obliga	ions arising out of	f a separati	on agreement or div	vorce that you did r	not report as
	tor 1 and Debtor 2 or	•	priority	claims	•	· ·	•	-
_	east one of the debtor	rs and another or a community debt			٠.	lans, and other simi	ilar debts	
☐ Che	CK II LIIIS CIAIIII IS 10	a community debt	✓ Other.	Specify Unsecu	ıred			
Is the c	laim subject to offse	et?						
<b>☑</b> No								

Yes

Case number (if known)

Debtor 1

RoseMerleSmithFirst NameMiddle NameLast Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims -	- Continuation Page							
After	listing any entries on this page, number them beginnin	g with 4.4, followed by 4.5, and so for	rth.					Tot	al claim
4.2	Affirm, Inc.	Last 4 digits of account number		\$432.00					
	Nonpriority Creditor's Name								
	Attn: Bankruptcy	When was the debt incurred?		6/	/1/2	022	<u> </u>		
	30 Isabella St , Floor 4	• A - of the data way file the alaim is	. Ch.	ءاء م	بالما	بدما			
	Number Street	As of the date you file, the claim is	: Che	eck.	all	ınaı a	арріу.		
	Pittsburgh, PA 15212	<ul><li>☐ Contingent</li><li>☐ Unliquidated</li></ul>							
	City State ZIP Code	□ Disputed							
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured	claim	ղ։					
	Debtor 1 only	☐ Student loans							
	Debtor 2 only	<ul><li>Obligations arising out of a separa</li></ul>	ation	an	reei	ment	or divor	rce that you did not re	nort as
	Debtor 1 and Debtor 2 only	priority claims	ation	ay	1001	псп	or divor	rce that you did not rep	port as
	At least one of the debtors and another	Debts to pension or profit-sharing	plan	ıs, a	and	othe	r similar	debts	
	☐ Check if this claim is for a community debt	☑ Other. Specify Unsecured						_	
	Is the claim subject to offset?								
	☑ No								
	☐ Yes								
4.3	AmSher Collection Services	Last 4 digits of account number	8	3	3	8	1	\$	1,075.00
	Nonpriority Creditor's Name	<del>.</del>	<del></del>					_	
	4524 Southlake Parkway Suite 15	When was the debt incurred? 4/1/2024							
	Number Street								
		As of the date you file, the claim is: Check all that apply.							
	Birmingham, AL 35244	Contingent							
	City State ZIP Code	- Unliquidated							
		☐ Disputed							
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:							
	Debtor 1 only	☐ Student loans							
	Debtor 2 only	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that you did not report as</li></ul>							
	Debtor 1 and Debtor 2 only	priority claims							
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts							
	☐ Check if this claim is for a community debt	Other. Specify CollectionAttorney							
	Is the claim subject to offset?								
	☑ No								
	☐ Yes								

Debtor 1

Rose Merle Smith Case number (if known) \_\_\_\_\_\_\_

First Name Middle Name Last Name

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page				
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth.  Total claim				
4.4	Chamberlain University	Last 4 digits of account number \$1				
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 4262  Number Street	As of the date you file, the claim is: Check all that apply.  Contingent				
	Scranton, PA 18505	Unliquidated				
	City State ZIP Code	☐ Disputed				
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  □ Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Student Loans				
4.5	Continental Finance Co  Nonpriority Creditor's Name  Attn: Bankruptcy Attn: Bankruptcy	Last 4 digits of account number       4       3       7       4       \$495.00         When was the debt incurred?       9/1/2014       9/1/2014       3/1/2014				
	4550 Linden Hill Rd , Ste 4  Number Street  Wilmington, DE 19808-2952  City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed				
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ✓ No  □ Yes	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard				

Debtor 1 Rose Document Page 25 of 52

Smith Case number (if known) \_

First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim Lvnv Funding/Resurgent Capital Last 4 digits of account number \$1,269.00 Nonpriority Creditor's Name When was the debt incurred? 10/15/2019 Attn: Bankruptcy PO Box 10497 As of the date you file, the claim is: Check all that apply. Number Street Contingent Greenville, SC 29603 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ☐ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify UnknownLoanType Is the claim subject to offset? **✓** No ☐ Yes 4.7 MTA Bridges and Tunnel Last 4 digits of account number \$20,639.00 Nonpriority Creditor's Name When was the debt incurred? **EZ Pass Violations and Inquiries** PO Box 15186 As of the date you file, the claim is: Check all that apply. Number Street Contingent Albany, NY 12212 Unliquidated City State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ■ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ☐ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Tolls ☐ Check if this claim is for a community debt

Is the claim subject to offset?

✓ No ☐ Yes

Last Name

Debtor 1 Rose Document Page 26 of 52
Smith Case number (if known) \_

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **NYC Department of Finance** Last 4 digits of account number \$1,712.00 Nonpriority Creditor's Name When was the debt incurred? 1 Centre St FI 22 Number As of the date you file, the claim is: Check all that apply. Contingent New York, NY 10007-1632 ■ Unliquidated State ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Tolls Is the claim subject to offset? **☑** No ☐ Yes 4.9 NYS Thruway \$1,056.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? **PO Box 500** Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent Horseheads, NY 14845 ■ Unliquidated ZIP Code City State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Tolls Is the claim subject to offset? **✓** No

☐ Yes

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Debtor 1 Rose Merle Smith

 Rose
 Merle
 Smith
 Case number (if known)

 First Name
 Middle Name
 Last Name

Pa	t 2: Your NONPRIORITY Unsecured Claims —	- Continuation Page							
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so for	rth.					Total claim	
4.10	One Main Financial	Last 4 digits of account number	5	5	6	_ ;	8_	\$9,272.00	
	Nonpriority Creditor's Name	When was the debt incurred?		5/1	/20	22			
	Attn: Bankruptcy	•		0, 1,	<u></u>				
	PO Box 3251	As of the date you file, the claim is	· Cho	ck al	II th	at a	nnly		
	Number Street	Contingent	. Cite	UK a	11 (11)	aı a	рріу.		
	Evansville, IN 47731	- Unliquidated							
	City State ZIP Code	☐ Disputed							
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as							
	At least one of the debtors and another	priority claims							
	☐ Check if this claim is for a community debt	<ul><li>☐ Debts to pension or profit-sharing</li><li>☑ Other. Specify Unsecured</li></ul>	plans	s, an	id o	ther	similar debts		
	☑ No □ Yes								
4.11	People's Alliance FCU	Last 4 digits of account number 0 1 4 2 \$4,999.00							
	Nonpriority Creditor's Name	When was the debt incurred?							
	Attn: Bankruptcy	When was the debt incurred?							
	125 Wireless Blvd								
	Number Street								
	Hauppauge, NY 11788	<ul> <li>Unliquidated</li> </ul>							
	City State ZIP Code	☐ Disputed							
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report a priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify CreditCard						ot report as	
	☑ No □ Yes								

Last Name

Debtor 1 Rose Document Page 28 of 52
Smith Case number (if known) \_

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.12 Port Authority / Alliance One Last 4 digits of account number \$3,472.00 Nonpriority Creditor's Name When was the debt incurred? 451 SW Sedgwick Rd Ste 220 As of the date you file, the claim is: Check all that apply. Contingent Port Orchard, WA 98367 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Tolls Is the claim subject to offset? **☑** No ☐ Yes **Professional Account Management** Last 4 digits of account number \$5,648.00 Nonpriority Creditor's Name When was the debt incurred? **PO Box 500** Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent Horseheads, NY 14845 ■ Unliquidated ZIP Code City State Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify Tolls Is the claim subject to offset? **✓** No

☐ Yes

Last Name

Debtor 1 Rose Document Page 29 of 52

Smith Case number (if known) \_

Middle Name

First Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim **Sunbit Financial** Last 4 digits of account number 1 3 7 6 \$819.00 Nonpriority Creditor's Name When was the debt incurred? 6/12/2023 Attn: Bankruptcy 10880 Wilshire Blv Suite 870 As of the date you file, the claim is: Check all that apply. Number Street Contingent Los Angeles, CA 90024 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ☑ Debtor 1 only Student loans ☐ Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims At least one of the debtors and another ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt ☑ Other. Specify InstallmentSalesContract Is the claim subject to offset? **√** No ☐ Yes 4.15 **Teachers Federal Credit Union** Last 4 digits of account number 0 3 0 0 \$1,319.00 Nonpriority Creditor's Name When was the debt incurred? 7/1/2015 Attn: Bankruptcy P.O. Box 9005 As of the date you file, the claim is: Check all that apply. Number Street ☐ Contingent Smithtown, NY 11787 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as ☐ Debtor 1 and Debtor 2 only priority claims ■ At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts ☐ Check if this claim is for a community debt Other. Specify Is the claim subject to offset? **☑** No ☐ Yes

Debtor 1 Rose Document Page 30 of 52

Smith Case number (if known) \_

First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Total claim 4.16 Verizon Last 4 digits of account number \$264.00 0 0 0 1 Nonpriority Creditor's Name When was the debt incurred? 3/1/2020 Verizon Wireless Bk Admin 500 Technology Dr Ste 550 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Weldon Springs, MO 63304 Disputed ZIP Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **☑** Debtor 1 only ☐ Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debtor 1 and Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts ☐ At least one of the debtors and another ☑ Other. Specify Agriculture ☐ Check if this claim is for a community debt Is the claim subject to offset? **☑** No ☐ Yes 4.17 Yonkers Parking Violation Bureau Last 4 digits of account number \$319.00 Nonpriority Creditor's Name When was the debt incurred? 87 Nepperhan Avenue Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Yonkers, NY 10701 ■ Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only

priority claims

☑ Other. Specify Tolls

Obligations arising out of a separation agreement or divorce that you did not report as

Debts to pension or profit-sharing plans, and other similar debts

☐ Debtor 1 and Debtor 2 only

Is the claim subject to offset?

✓ No ☐ Yes

■ At least one of the debtors and another

☐ Check if this claim is for a community debt

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Debtor 1

Rose Merle Smith Case number (if known) \_
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim. **Total claim Total claims** 6a. **Domestic support obligations** 6a. \$0.00 from Part 1 6b. Taxes and certain other debts you owe the government 6b. \$0.00 Claims for death or personal injury while you were 6c. 6c. \$0.00 intoxicated Other. Add all other priority unsecured claims. 6d. 6d. \$0.00 Write that amount here. Total. Add lines 6a through 6d. 6e. \$0.00 **Total claim Total claims** 6f. Student loans 6f. \$0.00 from Part 2 6g. Obligations arising out of a separation agreement or 6g. \$0.00 divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other 6h. 6h. \$0.00 similar debts 6i. Other. Add all other nonpriority unsecured claims. 6i. \$55,285.48 Write that amount here. 6j. Total. Add lines 6f through 6i. 6j.

\$55,285.48

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Fill in this information	n to identify your case	:		
Debtor 1	Rose	Merle	Smith	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bankruptcy Court for the:		Easte	rn District of Pen	nsylvania
Case number (if known)				

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or o	company with whom y	you ha	ve the contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City	S	State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City	S	State	ZIP Code	
2.3					
	Name				
	Number	Street			
	City	S	State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City	S	State	ZIP Code	

			Document P	age 33 of 52	
Fill in this inform	ation to identify yo	our case:			
Debtor 1	Rose	Merle	Smith		
	First Name	Middle Name	Last Name		_
Debtor 2					_
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court f	for the: Easte	Prn District of	Pennsylvania	
Case number					
(if known)					☐ Check if this is an amended filing
Official Forn	n 106H				
		ur Cadabta			
<u>scneau</u>	ie H: Yo	ur Codebto	ors		12/
☑ No ☐ Yes	o last 9 years ha	we you lived in a comm	unity proporty state o	r tarritary? (Community	property states and territories include Arizona
				shington, and Wisconsin.)	property states and territories include Arizona,
☑ No. Go					
_	• • •	ormer spouse, or legal ed	quivalent live with you a	t the time?	
☐ No				<b>-</b> ::::	
☐ Ye	s. In which comm	nunity state or territory did	you live?	Fill ir	n the name and current address of that person.
Na	ame of your spous	se, former spouse, or leg	al equivalent		
Nu	umber	Street		_	
Ci	ity	State	ZIP Co	de	
2 again as	s a codebtor only	y if that person is a gua	rantor or cosigner. Ma	ake sure you have listed	se is filing with you. List the person shown in lind the creditor on Schedule D (Official Form 106D the dule E/F, or Schedule G to fill out Column 2.

	Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
			Check all schedules that apply:
3.1			
	Name		Schedule D, line
			Schedule E/F, line
	Number	Street	☐ Schedule G, line
	City	State ZIP Code	<del>_</del>
	City	State	
3.2		State ZII Cour	
3.2	Name	State ZII Coule	Schedule D, line
3.2		State ZII Coule	
3.2		Street	Schedule D, line
3.2	Name		Schedule D, line

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			Docui	nent Pag	e 34 01 :	<u>52</u>		
Fil	in this information to	o identify your ca	se:					
_	ebtor 1	Poso	Merle Sm	ith				
D	ebior i	Rose First Name		Name				
D	ebtor 2							
	Spouse, if filing)	First Name	Middle Name Last	Name			Check if this is:	
	nited States Bankrup	otov Court for the	. Fastern Dist	rict of Pennsylv	<i>y</i> ania		An amended filing	3
	·	oldy Court for the	Lastern bist	riot of F chilisyn	rama	-	A supplement sho	
_	ase number known)						chapter 13 incom	e as of the following date
	,						MM / DD / YYYY	<del>_</del>
	–	4001					, 55, 1111	
<u>Ot</u>	ficial Form	<u> 1061</u>						
So	chedule I:	Your Inc	come					12/15
info spo add	rmation. If you are nuse is not filing with	narried and not in you, do not inc you, do not inc your name and c	le. If two married people are filing jointly, and your spous lude information about you case number (if known). Ans	se is living with your spouse. If more	ou, include i space is ne	information ab	out your spouse. If you	are separated and your
1.	Fill in your employ	ment						
	information.			Debtor 1			Debtor 2 or no	n-filing spouse
	If you have more th	nan one iob.	Employment status	<b>☑</b> Employed □	Not Employ	ed	□ Employed □ No	nt Employed
	attach a separate p	age with	,	— Linployed —	rtot Employ	ou	— Employed — Ne	n Employed
	information about a employers.	additional	Occupation	Home Health A	Aide			
	Include part time, s	accord or	Employer's name	Elite Home He	alth Care.	Inc.		
	self-employed work						_	
	Occupation may in	clude student	Employer's address	100 West Aver Number Street	nue Suite	910	Number Street	
	or homemaker, if it			rumber offect			rumber offeet	
							_	
							_	
				Jenkintown, P	A 10046			
				City	State	Zip Code	City	State Zip Code
			How long employed there?	Since August	t 2024			_
Pa	art 2: Give Detai	Is About Mont	thly Income					
	Estimate monthly unless you are sep		e date you file this form. If yo	ou have nothing to	report for a	ny line, write \$	0 in the space. Include y	our non-filing spouse
	If you or your non-f	iling spouse have	e more than one employer, c	ombine the inform	nation for all	employers for	that person on the lines	below. If you need
	more space, attach	i a separate shee	et to this form.					ı
					Fo	r Debtor 1	For Debtor 2 or non-filing spouse	
2.			and commissions (before al culate what the monthly wag		\$	1,022.67	\$0.00	
3.	Estimate and list n	•	, -	e would be. 3.		\$0.00	+ \$0.00	
٠.		5	. i A.	0.	' ——	ψυ.υυ	. φυ.υυ	

4. Calculate gross income. Add line 2 + line 3.

\$1,022.67

\$0.00

Doc 1 Filed 10/23/24 Entered 10/23/24 11:58:57 Desc Main Case 24-13781-amc Document Page 35 of 52 **Smith** Debtor 1 Rose Merle Case number (if known) -First Name Middle Name Last Name For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here.....→ \$1,022.67 \$0.00 4. List all payroll deductions: \$148.72 \$0.00 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 \$0.00 5e. Insurance 5e. \$0.00 \$0.00 5f. Domestic support obligations 5f. \$0.00 \$0.00 5g. Union dues 5g. 5h. Other deductions. Specify: \$0.00 \$0.00 5h. \$148.72 \$0.00 Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$873.95 \$0.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$875 00 \$0.00 9. 1

	monthly net income.	8a.	. 4075.00	\$0.00	
8	Bb. Interest and dividends	8b.	<b>\$0.00</b>	\$0.00	
8	Sc. Family support payments that you, a non-filing spouse, or a dependent regularly receive				
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00	
8	Bd. Unemployment compensation	8d.	<b>\$0.00</b>	\$0.00	
8	Be. Social Security	8e.	\$3,001.00	\$0.00	
8	Sf. Other government assistance that you regularly receive				
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.				
	Specify:	8f.	\$0.00	\$0.00	
8	Bg. Pension or retirement income	8g.	\$3,029.38	\$0.00	
8	Bh. Other monthly income. Specify:	8h.	+ \$0.00	+\$0.00	
	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$6,905.38	\$0.00	
	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$7,779.33	+ \$0.00	= \$7,779.33
1. \$	State all other regular contributions to the expenses that you list in Scheo	lule J.			
f	include contributions from an unmarried partner, members of your household friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a		, ,,	·	
;	Specify:				+ \$0.00
	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistical		•	ncome. Write that	\$7,779.33 Combined
					monthly income
3. I	Do you expect an increase or decrease within the year after you file this for	orm?			
	√INo.				
-	☐Yes. Explain:				
ficial	Form 106I Schedule I:	Your In	Income		page <b>2</b>

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Debtor 1 Rose Merle **Smith** Case number (if known) -First Name Middle Name Last Name 8a. Attached Statement **Rental Income** 1. Gross Monthly Income: \$1,100.00 TOTAL EXPENSES \$225.00 3. AVERAGE NET MONTHLY INCOME \$875.00

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Fill in this information	n to identify your case	:	
Debtor 1	Rose	Merle	Smith
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bank	ruptcy Court for the:	Easte	ern District of Pennsylvani
Case number (if known)			

#### Official Form 106J

#### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Househo	Id			
Is this a joint case?				
No. Go to line 2.  Yes. Does Debtor 2 live in a sel  No  Yes. Debtor 2 must file	parate household? e Official Form 106J-2, <i>Expenses for</i>	<sup>r</sup> Separate Household of Debtor 2.		
2. Do you have dependents?	□ <sub>No</sub>			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	ioi cacii acponacii	Parent	74	. □ <sub>No.</sub> ☑ <sub>Yes.</sub>
namos.				- ☐ No. ☐ Yes.
				- □No. □Yes.
				- □No. □Yes.
				- ☐No. ☐Yes.
Do your expenses include expenses of people other than yourself and your dependents?	<b>☑</b> No □ <sub>Yes</sub>			
Part 2: Estimate Your Ongoing  Estimate your expenses as of your ba	nkruptcy filing date unless you are			
date after the bankruptcy is filed. If the Include expenses paid for with non-casuch assistance and have included it	ash government assistance if you k	now the value of		ur expenses
The rental or home ownership exp for the ground or lot.	penses for your residence. Include	first mortgage payments and any rent	4	\$1,024.32
If not included in line 4:				
4a. Real estate taxes			4a	\$0.00
4b. Property, homeowner's, or ren	iter's insurance		4b	\$25.00
4c. Home maintenance, repair, ar	nd upkeep expenses		4c	\$50.00
4d. Homeowner's association or o	condominium dues		4d	\$0.00

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Debtor 1 Rose Merle Smith Case number (if known)

Last Name

First Name

Middle Name

	First Name Middle Name Last Name		
			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$250.00
	6b. Water, sewer, garbage collection	6b.	\$100.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$250.00
	6d. Other. Specify:	6d.	\$0.00
	Food and housekeeping supplies	7.	\$1,800.00
	Childcare and children's education costs	8.	\$0.00
	Clothing, laundry, and dry cleaning	9.	\$341.00
0.	Personal care products and services	10.	\$327.00
1.	Medical and dental expenses	11.	\$289.00
2.	<b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$470.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$202.00
4.	Charitable contributions and religious donations	14.	\$0.00
5.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45	00.00
	15a. Life insurance	15a.	\$0.00
	15b. Health insurance	15b.	\$0.00
	15c. Vehicle insurance	15c.	\$426.00
	15d. Other insurance. Specify:	15d.	\$0.00
3.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	\$0.00
7.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$0.00
	17b. Car payments for Vehicle 2	17b.	\$0.00
	17c. Other. Specify:	17c.	\$0.00
	17d. Other. Specify:	17d.	\$0.00
3.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$0.00
9.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0.00
).	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		<u>.</u>
	20a. Mortgages on other property	20a.	\$0.00
	20b. Real estate taxes	20b.	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00

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Deb	tor 1	Rose	Merle	Merle Smith	Case number (if known) -	
		First Name	Middle Name	Last Name		
21.	Other. Spe	cify:		_	21. +	\$0.00
22.	Calculate y	our monthly exp	enses.			
	22a. Add lir	nes 4 through 21.			22a	\$5,554.32
	22b. Copy	line 22 (monthly e	expenses for Debtor 2), i	f any, from Official Form 106J-2	22b.	\$0.00
	22c. Add lir	ne 22a and 22b. 1	he result is your monthl	y expenses.	22c	\$5,554.32
23.	Calculate y	our monthly net	income.			
	23a. Copy	line 12 (your com	bined monthly income) f	rom Schedule I.	23a	\$7,779.33
	23b. Copy	your monthly exp	enses from line 22c abo	ve.	23b. <b>_</b>	\$5,554.32
	23c. Subtra	act your monthly e	expenses from your mon	thly income.		
	The re	esult is your <i>mont</i>	hly net income.		23c	\$2,225.01
24.	For example mortgage p	le, do you expect	to finish paying for your	enses within the year after you file car loan within the year or do you e of a modification to the terms of yo	expect your	
	☑ No.	None				

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Fill in this information	to identify your case			
Debtor 1	Rose	Merle	Smith	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankr	uptcy Court for the:	Easte	rn District of Pennsylv	ania
Case number				
(if known)				

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all

of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original new Summary and check the box at the top of this page.	al forms, you must fill out a
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	¢256 560 00
1a. Copy line 55, Total real estate, from Schedule A/B	\$256,560.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$21,221.00
1c. Copy line 63, Total of all property on Schedule A/B	\$277,781.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	<u>\$267,496.41</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$55,285.48
Your total liabilities	\$322,781.89
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$7,779.33
Copy your combined monthly income from line 12 of Schedule I	<u> </u>
5. Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$5,554.32

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Debtor 1 Rose Merle Smith Case number (if known) \_\_\_\_\_\_\_

Pa	t 4: Answer These Questions for Administrative and Statistical Records		
	re you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to t	the court with your other schedules.	
5	<ul> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form to the court with your other schedules.</li> </ul>	U.S.C. § 159.	
	rom the <i>Statement of Your Current Monthly Income</i> : Copy your total current monthly income from 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	m Official \$4,324.56	
9. <b>C</b>	opy the following special categories of claims from Part 4, line 6 of Schedule E/F:	Total claim	
	From Part 4 on Schedule E/F, copy the following:		
	9a. Domestic support obligations (Copy line 6a.)	<u>\$0.00</u>	
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	<u>\$0.00</u>	
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	<u>\$0.00</u>	
	9d. Student loans. (Copy line 6f.)	<u>\$0.00</u>	
	9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	<u>\$0.00</u>	
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00_	
	9g. <b>Total</b> . Add lines 9a through 9f.	\$0.00	

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Fill in this information	to identify your case	:		
Debtor 1	Rose	Merle	Smith	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bankr	uptcy Court for the:	Easte	rn District of Per	nsylvania
Case number (if known)				

#### Official Form 106Dec

#### Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attor	ney to help you fill out bankruptcy forms?
<b>☑</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of parium, I declare that I have read the com-	amore and schoolules filed with this declaration and that they are true and accreat
Under penalty of perjury, I declare that I have read the sum	nmary and schedules filed with this declaration and that they are true and correct.
X /s/ Rose Merle Smith	
Rose Merle Smith, Debtor 1	
Date 10/23/2024 MM/ DD/ YYYY	

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Fill in this information	n to identify your case:		
Debtor 1	Rose	Merle	Smith
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	ruptcy Court for the:	Easte	rn District of Pennsylvania
Case number (if known)			

#### Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Mari	tal Status and Where I	od Erved Berore		
1. What is your current marital status?				
☐ Married				
✓ Not married				
2. During the last 3 years, have you lived ar	nywhere other than where y	ou live now?		
<b>☑</b> No				
☐ Yes. List all of the places you lived in the	ne last 3 years. Do not includ	le where you live now.		
3. Within the last 8 years, did you ever live territories include Arizona, California, Idaho,				
<b>☑</b> No				
Yes. Make sure you fill out Schedule H	: Your Codebtors (Official Fo	orm 106H).		
Part 2: Explain the Sources of Your	ncome			
4. Did you have any income from employmer Fill in the total amount of income you receive If you are filing a joint case and you have income the company of t	d from all jobs and all busine	esses, including part-time a	ctivities.	/ears?
<b>∟</b> No				
☑ No ☑ Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Debtor 1 Sources of income	Gross Income	Debtor 2 Sources of income	Gross Income
		Gross Income (before deductions and exclusions)		Gross Income (before deductions and exclusions)
	Sources of income	(before deductions and	Sources of income	(before deductions and exclusions)

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ebtor 1	Rose	Merle	Smith		Case number (if know	vn)
	First Name	Middle Nar	me Last Name			
	calendar year: / 1 to December 31,		Wages, commissions, bonuses, tips	\$5,289.00	☐ Wages, commissions, bonuses, tips	
(,	,,, , <u>.</u>	YYYY	☑ Operating a business	\$10,456.00	Operating a business	
For the calendar year before that: (January 1 to December 31, 2022 )		<b>2022</b> )	Wages, commissions, bonuses, tips	\$225,521.00	☐ Wages, commissions, bonuses, tips	
		YYYY	Operating a business		Operating a business	
Include include include public benefiling a join	come regardless of w efit payments; pension	hether that inco	me; interest; dividends; m	of other income are alimony		rity, unemployment, and othed in the definition of the definition
			Debtor 1		Debtor 2	
			Sources of income	Gross income from	Sources of income	Gross Income from
			Describe below.	each source (before deductions and exclusions)	Describe below.	each source (before deductions and exclusions)
	nuary 1 of current your filed for bankruptc		Rental Income	\$2,200.00		
For last	calendar year:		Pension	\$37,590.00		
	1 to December 31,	•		<del></del>		
For the	calendar year before		extra income for	\$10,416.00		
(January	/ 1 to December 31,	YYYY	misc gambling and misc foreign stocks and other	\$36,280.00 \$23,547.00		
		•	Pension			
			Social Security			
Part 3: L	ist Certain Paym	ents You Ma	de Before You Filed f	or Bankruptcy		
6. Are eith	er Debtor 1's or Debt	tor 2's debts pr	imarily consumer debts?			
☐ No.			s primarily consumer del	bts. Consumer debts are de	fined in 11 U.S.C. § 101(8) a	s "incurred by
	•			pay any creditor a total of \$7	7,575* or more?	
	☐ No. Go to line 7	•				
	Yes. List below	w each creditor creditor. Do no	ot include payments for do	of \$7,575* or more in one o		
			o an attorney for this bank 5 and every 3 years after	ruptcy case. that for cases filed on or afte	er the date of adjustment.	

otor 1 ✓Yes.	Rose		Merle	Cmith					
<b>√</b> 1 Yes			INICIIC	Smith		Case	number (if	known)	
<b>V</b> Yes	First Na	me	Middle Name	Last Name	•	_			
	Debtor 1 or Debtor 2 or both have primarily consumer debts.								
_	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
	☐ No. Go	-	•						
	_								
	✓ Yes. List below each creditor to include payments for dome an attorney for this bankrup			estic support obligat					
	·		Dates of payment	Total amount pa	id Amount you	still owe	Was this payment for		
C	Capital One Auto Finance			08/01/2024	\$2,964	.00 \$38	3,331.00	☐Mortgage	
Cr	reditor's Na	me						<b>√</b> Car	
<u> </u>	Attn: Ban	kruptcy			_			Credit card	
_	7933 Pres			<u> </u>				Loan repayment	
No	lumber S	treet			_			☐ Suppliers or vendors	
<u> </u>	Plano, TX	75024-23		_				• •	
Ci	ity	St	ate ZIP Code	e				Other	
erate as a	a sole prop	ctor, persor rietor. 11 U	n in control, or .S.C. § 101. In	owner of 20% or mor	general partners; part re of their voting secul domestic support oblig	ities; and any manag	ing agent, i	ncluding one for a business yo	
erate as a	a sole prop	ctor, persoi	n in control, or .S.C. § 101. In	owner of 20% or mor	re of their voting secu	ities; and any manag	ing agent, ii support and	ncluding one for a business you	
erate as a	a sole prop	ctor, persor rietor. 11 U	n in control, or .S.C. § 101. In	owner of 20% or mo clude payments for c	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s	ing agent, ii support and	ncluding one for a business you alimony.	
erate as a ☑ No ☑ Yes. Lis	a sole prop	ctor, persor rietor. 11 U	n in control, or .S.C. § 101. In	owner of 20% or more clude payments for con- Dates of payment	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still owe	Reason	ncluding one for a business you I alimony.  for this payment  nent for loan when short	
erate as a □ No ☑ Yes. Lis Georgia	a sole prop ist all paym a Brown	ctor, persor rietor. 11 U	n in control, or .S.C. § 101. In	owner of 20% or mol clude payments for c	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still	ing agent, in support and	ncluding one for a business yo di alimony.  for this payment  nent for loan when short	
erate as a No Yes. Lis Georgia Insider's Na 95-117 F	a sole prop ist all paym a Brown ame Ravine A	ctor, persor rietor. 11 U	n in control, or .S.C. § 101. In	owner of 20% or more clude payments for con- Dates of payment	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still owe	Reason	ncluding one for a business you I alimony.  for this payment  nent for loan when short	
erate as a  No Yes. Lis  Georgia nsider's Na  95-117 F Building	a sole propries a Brown ame Ravine Arg Apt 6A	ctor, persor rietor. 11 U	n in control, or S.C. § 101. In	owner of 20% or more clude payments for con- Dates of payment	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still owe	Reason	ncluding one for a business you I alimony.  for this payment  nent for loan when short	
Georgia nsider's Na 95-117 F Building	a sole proposition in the state of the state	ctor, persor rietor. 11 U nents to an	n in control, or S.C. § 101. In	owner of 20% or more clude payments for con- Dates of payment	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still owe	Reason	ncluding one for a business you I alimony.  for this payment  nent for loan when short	
Georgia nsider's Na 95-117 F Building Number Yonkers	a sole propries a Brown ame Ravine Arg Apt 6A	ctor, person rietor. 11 U	n in control, or S.C. § 101. Inconsider.	owner of 20% or more clude payments for con- Dates of payment	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still owe	Reason	ncluding one for a business you I alimony.  for this payment  nent for loan when short	
Georgia nsider's Na 95-117 F Building Number Yonkers	a sole proposition in the state of the state	ctor, persor rietor. 11 U nents to an	n in control, or S.C. § 101. In	owner of 20% or more clude payments for con- Dates of payment	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still owe	Reason	ncluding one for a business you I alimony.  for this payment  nent for loan when short	
Georgia nsider's Na 95-117 F Building Number Yonkers City	a Brown ame Ravine A Street s, NY 107	ctor, person rietor. 11 U	n in control, or S.C. § 101. Inconsider.	Dates of payment  VARIOUS	Total amount paid \$2,000.00	Amount you still owe \$0.00	Reason repaymon bills	for this payment  ment for loan when short  s	
Georgia nsider's Na 95-117 F Building Number Yonkers City Kirk Bro	a Brown ame Ravine A Street s, NY 107	ctor, person rietor. 11 U	n in control, or S.C. § 101. Inconsider.	Dates of payment  VARIOUS	re of their voting secur domestic support oblig	ities; and any manag ations, such as child s Amount you still owe	Reason repaymon bills	ncluding one for a business you I alimony.  for this payment  nent for loan when short S	
Georgia nsider's Na 95-117 F Building Number Yonkers City  Kirk Bro	a Brown ame Ravine A g Apt 6A Street s, NY 107	venue, Ro	n in control, or S.C. § 101. Inconsider.	Dates of payment  VARIOUS	Total amount paid \$2,000.00	Amount you still owe \$0.00	Reason repaymon bills	for this payment  ment for loan when short  s	
Georgia Insider's Na 95-117 F Building Number Yonkers City  Kirk Bro Insider's Na 101 Alki	a Brown ame Ravine A Street s, NY 107	venue, Ro	n in control, or S.C. § 101. Inconsider.	Dates of payment  VARIOUS	Total amount paid \$2,000.00	Amount you still owe \$0.00	Reason repaymon bills	for this payment  ment for loan when short  s	
Georgia Insider's Na 95-117 F Building Number Yonkers City Kirk Bro Insider's Na 101 Alki Number	a Brown ame Ravine A g Apt 6A Street s, NY 107	ctor, person rietor. 11 U	n in control, or S.C. § 101. Inconsider.	Dates of payment  VARIOUS	Total amount paid \$2,000.00	Amount you still owe \$0.00	Reason repaymon bills	for this payment  ment for loan when short  s	
Georgia Insider's Na 95-117 F Building Number Yonkers City Kirk Bro Insider's Na 101 Alki Number	a Brown a Brown ame Ravine A g Apt 6A Street s, NY 107	ctor, person rietor. 11 U	n in control, or S.C. § 101. Inconsider.	Dates of payment  VARIOUS	Total amount paid \$2,000.00	Amount you still owe \$0.00	Reason repaymon bills	for this payment  ment for loan when short  s	

Case 24-13781-amc Doc 1 Filed 10/23/24 Entered 10/23/24 11:58:57 Desc Main Document Page 46 of 52 Debtor 1 Rose Merle **Smith** Case number (if known). First Name Middle Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and **✓** No Yes. Fill in the details. 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? **✓** No ☐ Yes. Fill in the details. 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a courtappointed receiver, a custodian, or another official? **√** No Yes List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? **✓** No ☐ Yes. Fill in the details for each gift. 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? **√**No Yes. Fill in the details for each gift or contribution. List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? **√**No Yes. Fill in the details.

Document Page 47 of 52 Debtor 1 Rose Merle **Smith** Case number (if known) \_ Last Name First Name Middle Name Part 7: List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □No Yes. Fill in the details. Description and value of any property transferred Amount of payment Date payment or transfer was made Cibik Law, P.C. Person Who Was Paid Attorney's Fees 10/03/2024 \$1,250.00 1500 Walnut Street Suite 900 Number Street Philadelphia, PA 19102-3518 State mail@cibiklaw.com Email or website address Person Who Made the Payment, if Not You Description and value of any property transferred Date payment or Amount of payment transfer was made Cibik Law, P.C. Person Who Was Paid Attorney's Costs 09/05/2024 \$575.00 1500 Walnut Street Suite 900 Number Street Philadelphia, PA 19102-3518 State ZIP Code mail@cibiklaw.com Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. **✓** No Yes. Fill in the details. 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. **√**No. Yes. Fill in the details.

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Debtor 1	Rose	Merle		e 48 of 52
	First Name	Middle Name	Last Name	Case number (if known)
(These are  ✓ No  ☐ Yes. F	often called asset-p	protection devices.)	did you transfer any property to	a self-settled trust or similar device of which you are a beneficiary?  xes, and Storage Units
or transfer Include che	red? ecking, savings, mor		ancial accounts; certificates of d	struments held in your name, or for your benefit, closed, sold, moved, eposit; shares in banks, credit unions, brokerage houses, pension
_	Fill in the details.			
valuables?		ou have within 1 year l	pefore you filed for bankruptcy	any safe deposit box or other depository for securities, cash, or other
✓No				
<b>∟</b> Yes. F	Fill in the details.			
<b>√</b> No ☐ Yes. F	Fill in the details.		I for Someone Else	n 1 year before you filed for bankruptcy?
<b>23. Do you</b> <b>☑</b> No	hold or control any	y property that someor	ne else owns? Include any prop	perty you borrowed from, are storing for, or hold in trust for someone.
☐ Yes. F	Fill in the details.			
Part 10: 0	Give Details Abo	out Environmental I	nformation	
Enviro. substa cleanu Site mo or utiliz Hazaro polluta	nmental law means nces, wastes, or map of these substance ans any location, face it, including dispositions material means nt, contaminant, or services.	sterial into the air, land, es, wastes, or material. acility, or property as de sal sites. s anything an environm similar term.	cal statute or regulation concerr soil, surface water, groundwater fined under any environmental	ning pollution, contamination, releases of hazardous or toxic r, or other medium, including statutes or regulations controlling the aw, whether you now own, operate, or utilize it or used to own, operate, s waste, hazardous substance, toxic substance, hazardous material, then they occurred.
	y governmental uni	it notified you that you	may be liable or potentially lial	ole under or in violation of an environmental law?
<b>√</b> No				
Yes. F	Fill in the details.			

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Debtor 1	Rose	Merle	Smith	Case number (if know	vn)
	First Name	Middle Name	Last Name		
_	u notified any gove	ernmental unit of any	release of hazardous materia	31?	
<b>√</b> No					
Yes. F	ill in the details.				
•	u been a party in a	ny judicial or adminis	strative proceeding under any	y environmental law? Include settlements a	nd orders.
<b>√</b> No					
Yes. F	ill in the details.				
Part 11: 0	ive Details Abo	ut Your Business	or Connections to Any B	usiness	
_		• •	-	ve any of the following connections to any	business?
<b>□</b> A	sole proprietor or s	elf-employed in a trad	de, profession, or other activity	either full-time or part-time	
<b>□</b> A	member of a limite	d liability company (LL	LC) or limited liability partnersh	ıip (LLP)	
□ A	partner in a partner	rship			
□ A	n officer, director, o	r managing executive	of a corporation		
□ A	n owner of at least	5% of the voting or eq	juity securities of a corporation	ı	
<b>√</b> No. No	one of the above ap	plies. Go to Part 12.			
Yes. C	heck all that apply	above and fill in the de	etails below for each business		
	years before you t	filed for bankruptcy, o	did you give a financial stater	nent to anyone about your business? Includ	de all financial institutions,
<b>√</b> No					
Yes. F	ill in the details belo	w.			

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Debtor 1	Rose Merle		Smith	Ü	Case number (if known)	own)
	First Name	Middle Name	Last Name		,	

Part 12: Sign Below	
I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I dec and correct. I understand that making a false statement, concealing property, or obtaining mobankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both	oney or property by fraud in connection with a
X /s/ Rose Merle Smith Signature of Rose Merle Smith, Debtor 1	
Date 10/23/2024	
Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for	or Bankruptcy (Official Form 107)?
☑No	
Yes	
Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy for	orms?
✓No	
☐ Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Eastern District of Pennsylvania

In re	;	Smith, Rose Merle	Э				
					Case No.		_
Debte	or				Chapter	13	
			DISCLOSURE OF COM	PENSATION OF A	TTORNEY F	OR DEBTOR	
1.	cor	mpensation paid to	C. § 329(a) and Fed. Bankr. P. 2 o me within one year before the behalf of the debtor(s) in conter	filing of the petition in b	ankruptcy, or a	greed to be paid to	me, for services rendered
	For	r legal services, I l	nave agreed to accept			<u></u>	\$4,725.00
	Pri	or to the filing of th	nis statement I have received				\$1,250.00
	Bal	lance Due				<u> </u>	\$3,475.00
2.	The	e source of the co	mpensation paid to me was:				
	<b>V</b>	Debtor	Other (specify)				
3.	The	e source of compe	ensation to be paid to me is:				
	<b>V</b>	Debtor	Other (specify)				
4.		I have not agree	d to share the above-disclosed	compensation with any	other person u	nless they are men	nbers and associates of my
		_	share the above-disclosed come agreement, together with a lis		-		
5.	In r	return for the abov	ve-disclosed fee, I have agreed t	to render legal service f	or all aspects o	of the bankruptcy ca	ase, including:
	a.	Analysis of the bankruptcy;	debtor' s financial situation, and	rendering advice to the	e debtor in dete	rmining whether to	file a petition in
	b.	Preparation and	d filing of any petition, schedules	s, statements of affairs a	and plan which	may be required;	
	c.	Representation	of the debtor at the meeting of	creditors and confirmati	ion hearing, and	d any adjourned he	arings thereof;
6.	Ву	agreement with th	ne debtor(s), the above-disclose	d fee does not include t	the following se	rvices:	

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B2030 (Form 2030) (12/15)

Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

#### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10/23/2024 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm